Case 15-42727 Doc 4 Filed 08/03/15 Entered 08/03/15 17:17:47 Desc Main Document Page 1 of 6

United States Bankruptcy Court District of Minnesota

In	re Dale Donald Kiecker		Case N	Io.
		Debtor(s)	Chapter	7
	STATEMENT UNDER PAYMENT ADVICES DUE PUI			
y	Debtor has attached to this statement copies of all padays before the date of the filing of the petition from	•	or other evidence of	of payment received within (
	Debtor has not filed copies of payment advices or of of the filing of the petition from any employer because		f payment received	within 60 days before the days
	☐ Debtor was not employed during the 60 days pre	ceding the filin	g of the petition;	
	Debtor was employed for only a portion of the 60 during which debtor was unemployed;	0 days precedin	g the filing of the p	petition. Please specify perio
	☐ Debtor was self-employed during the 60 days pre	eceding the fili	ng of the petition;	
	Debtor received only unemployment, veteran's beduring the 60 days preceding the filing of the pet	•	ecurity, disability o	or other retirement income
	Other (please explain):			
Ιđ	clare under penalty of perjury that I have read this St	atement and it i	s true to the best of	Fmy knowledge information

Signature of Debtor: Dale D Police Date: July 31, 2015

and belief.

Check#	979210	Employee Name	KIECKER/DALE D		C	ENVILLE OUNTY	
Check Date	05/29/2015		70785 500TH STREET		5	05 SOUTH TH TREET	
Employee	2947		HECTOR, MN 55342			LIVIA , IN 56277	
# Pay	05/09/2015-				1	11 30277	
Period Pay Rate	05/22/2015 24,420				Net Pay	1,263.91	
	<u>Hours</u>		Pay Description NORMAL HOURS		<u>Amount</u> 1,758.24		
	72.00 8.00		SICK HRS USED		195.36		
	••••			Total Gross	1,953.60	Year To-	
	Current	Year To-Date	Other Deductions		<u>Current</u>	Date	
Gross	1,953.60	21,644.27	SUN LIFE FINANCIAL		0.00	73.50	
Fica/Med	149.45	1,635.01	AFSCME HWY UNION		0.00 50.00	280.00 550.00	
Fed. W/H	260.26	2,831.22	VALIC DEF COMP		0.00	251.80	
State W/H	103.00 126.98		COLONIAL INS POST TAX HEALTH PARTNERS		0.00	158.80	
Pera Tot W/H		6.995.09	HRA PRETX PREM UNION E	Œ	0.00	112.40	
100 4471.	(057.07	0,552.05		l Deductions	50.00	1,426.50	
			Benefits		Current	<u>Year To-</u> <u>Date</u>	
			ER PD LIFE 20,000		0.00	17.00	
			HRA ER EXP UNION EE'S	_	0.00	3,113.50	
				otal Benefits	0.00	3,130.50	Max Accum
		Current Accrued		orrent Taken 0.000	YTD Accrued 78.000	72.250	0.000
Vacation	58.332	0.000 0.000		8.000	40.000	48.000	0.000
Sick	8.170 0.000	0.000		0.000	3.750	3.750	0.000
Comp Time Personal	0.000	0.000		0.000	0.000	0.000	0.000
Wellness	0.000			0.000	0.000	0.000	0.000
Bereavemen	0.000	0.000		0.000	0.000	8.000	0.000
LWOP	0.000			0.000	0.000	0.000 0.000	0.000
Catastrophic				0.000 0.000	0.000	0.000	0.000
Military Lea	0.000 0.000			0.000	0.000	0.000	0.000
FMLA Direct Deposit		Bank		Amount			
Берози	Checking	HOME TOWN BANK		1,063.91			
	Checking	SOUTHPOINT FEDERAL CREDIT UN		100.00			
	Savings	SOUTHPOINT FEDERAL CREDIT UN		100.00			
[Re	turn to Date S	Selection [Return to Main Opt	ions		•	

Check#	979445	Employee Name	KIECKER/DALE D		(RENVILLE COUNTY	
Check		*				.05 SOUTH TH	
Date	06/12/2015		70785 500TH STREET			TREET	
						DLIVIA,	
Employee #	2947		HECTOR, MN 55342			MN 56277	
# Pay	05/23/2015-						
Period	06/05/2015						
Pay Rate					Net Pay	1,187.12	
-	<u>Hours</u>	Rate	Pay Description		Amount		
	70.50		NORMAL HOURS		1,721.61	•	
	8.00		HOLIDAY PAY		195.36 36.63		
	1.50	24.420	VAC HRS USED	Total Gross	1,953.60		
				Total Gross		Year To-	
	Current	Year To-Date	Other Deductions		Current	Date	
Gross	1,953.60	23 597 87	SUN LIFE FINANCIAL		7.35	80.85	
Fica/Med	147.37		AFSCME HWY UNION		28.00	308.00	
Fed. W/H	253.48	3,084,70	VALIC DEF COMP		50.00	600.00	
State W/H	101.00		COLONIAL INS POST TAX		25.18	276.98	
Pera	126.98	1,533.84	HEALTH PARTNERS		15.88	174.68	
Tot W/F	628.83	7,623.92	HRA PRETX PREM UNION		11.24	123.64	
			Tota	al Deductions	137.65	1,564.15 Year To-	
			Benefits		Current	Date	
			ER PD LIFE 20,000		3.40	20.40	
			HRA ER EXP UNION EE'S		622.70	3,736.20	
			=	Total Benefits	626.10	3,756.60	
	Available	Current Accrued		urrent Taken	YTD Accrued		Max Accum
Vacation	64.832			1.500	86.000	73.750	0.000
Sick	12.170			0.000	44.000	48.000	0.000
Comp Time	0.000			0.000	3.750	3.750	0.000 0.000
Personal	0.000			0.000	0.000	0.000 0.000	0.000
Wellness	0.000			0.000	0.000 0.000		0.000
Bereavemen				0.000 0.000	0.000		0.000
LWOP	0.000			0.000	0.000		0.000
Catastrophic				0.000	0.000		0.000
Military Lea FMLA	0.000			0.000	0.000	0.000	0.000
Direct				Amount			
Deposit	Account	<u>Bank</u>		<u>Amount</u>			
	Checking	HOME TOWN BANK		987.12			
		SOUTHPOINT					
	Checking	FEDERAL		100.00			
	J	CREDIT UN					
		SOUTHPOINT		100.00			
	Savings	FEDERAL		100.00			
		CREDIT UN					
•			<u> </u>	3			
i Re	turn to Date S	Selection [Return to Main Op	uons			

				Ū			
					F	ENVILLE	
Check#	979689	Employee Name	KIECKER/DALE D			COUNTY	
					1	05 SOUTH	
Check	06/26/2015		70785 500TH STREET		5	TH	
Date	00/20/2013		,0,00 000111011		S	TREET	
Employee					(OLIVIA ,	
#	2947		HECTOR, MN 55342		N	MN 56277	
•	06/06/2015-						
	06/19/2015						
Pay Rate	24,420				Net Pay	1,187.12	
•	<u>Hours</u>		Pay Description		Amount		
	78.00		NORMAL HOURS		1,904.76 48.84		
	2.00	24.420	VAC HRS USED	F-4-1 Cware	1,953.60		
				Fotal Gross	1,955.00	Year To-	
	Current	Year To-Date	Other Deductions		<u>Current</u>	Date	
_		25 551 47	SUN LIFE FINANCIAL		7.35	88.20	
Gross	1,953.60	1 020 75	AFSCME HWY UNION		28.00	336.00	
Fica/Med Fed. W/H	147.37 253.48		VALIC DEF COMP		50.00	650.00	
State W/H	101.00		COLONIAL INS POST TAX		25.18	302.16	
Pera	126.98		HEALTH PARTNERS		15.88	190.56	
Tot W/H			HRA PRETX PREM UNION EE		11.24	134.88	
100 1172		,		Deductions	137.65	1,701.80	
			Benefits		Current	Year To-	
						<u>Date</u> 20.40	
			ER PD LIFE 20,000		0.00 0.00	3,736.20	
			HRA ER EXP UNION EE'S	tal Benefits	0.00	3,756.60	
	49-61-	Command Assembled		rent Taken	YTD Accrued		Max Accum
N742	70.832	Current Accrued 8.000		2.000	94.000	75.750	0.000
Vacation Sick	16.170			0.000	48.000	48.000	0.000
Comp Time	0.000			0.000	3.750	3.750	0.000
Personal	0.000			0.000	0.000	0.000	0.000
Wellness	0.000			0.000	0.000	0.000	0.000
Bereavement				0.000	0.000	8.000	0.000
LWOP	0.000			0.000	0.000	0.000	0.000 0.000
Catastrophic				0.000	0.000	0.000 0.000	0.000
Military Lea				0.000 0.000	0.000 0.000	0.000	0.000
FMLA	0.000	0.000	į	0.000	0.000	0.000	0.000
Direct	Account	Bank		<u>Amount</u>			
Deposit		HOME TOWN					
	f 'haalama	BANK		987.12			
		SOUTHPOINT					
		FEDERAL		100.00			
		CREDIT UN					
		SOUTHPOINT					
	Savings	FEDERAL		100.00			
		CREDIT UN					
_				<u>-</u>			
Re	turn to Date S	Selection	Return to Main Option	ns			
_				<u>-</u> -			

Check#	979932	Employee Name	KIECKER/DALE D		C	ENVILLE COUNTY	
Check Date	07/10/2015		70785 500TH STREET		5	05 SOUTH TH STREET	
Employee	2947		HECTOR, MN 55342			OLIVIA , MN 56277	
#					1	,111,000.,	
Pay Period	06/20/2015- 07/03/2015						
Pay Rate					Net Pay	1,187.12	•
	Hours		Pay Description		Amount		
	60.00		NORMAL HOURS		1,465.20 195.36		
	8.00		HOLIDAY PAY		293.04		
	12.00	24.420	VAC HRS USED	Total Gross	1,953.60		
				10121 01035	•	Year To-	
	Current	<u>Year To-Date</u>	Other Deductions		Current	Date	
Gross	1,953.60	27.505.07	SUN LIFE FINANCIAL		7.35	95.55	
Fica/Med	147.37	2,077.12	AFSCME HWY UNION		28.00	364.00	
Fed. W/H	253.48	3,591.66	VALIC DEF COMP		50.00	700.00	
State W/H	101.00	1,425.00	COLONIAL INS POST TAX		25.18	327.34	•
Pera	126.98	1,787.80	HEALTH PARTNERS		15.88	206.44 146.12	
Tot W/H	i 628.83	8,881.58	HRA PRETX PREM UNION		11.24 137.65	1,839.45	•
			100	al Deductions	157.05	Year To-	
			Benefits		<u>Current</u>	Date	
			ER PD LIFE 20,000		3.40	23.80	
			HRA ER EXP UNION EE'S		622.70	4,358.90	
				Total Benefits	626.10	4,382.70	
	Available	Current Accrued	Ω	urrent Taken	YTD Accrued		Max Accum
Vacation	66.832	8.000	•	12.000	102.000	87.750	0.000 0.000
Sick	20.170			0.000	52.000	48.000 3.750	0.000
Comp Time	0.000			0.000 0.000	3.750 0.000	0.000	0.000
Personal	0.000			0.000	0.000	0.000	0.000
Wellness	0.000			0.000	0.000	8.000	0.000
Bereavemen LWOP	t 0.000 0.000			0.000	0.000	0.000	0.000
Catastrophic				0.000	0.000	0.000	0.000
Military Lea				0.000	0.000	0.000	0.000
FMLA	0.000)	0.000	0.000	0.000	0.000
Direct	Account	Bank		Amount			
Deposit	Account						
	Checking	HOME TOWN BANK		987.12			
	Checking	SOUTHPOINT FEDERAL CREDIT UN		100.00			
	Savings	SOUTHPOINT FEDERAL CREDIT UN		100.00			
[Re	eturn to Date §	Selection	Return to Main Op	tions			

Check#	980166	Employee Name	KIECKER/DALE D			ENVILLE OUNTY	
CHUCK	,00100				-	05 SOUTH	
Check Date	07/24/2015		70785 500TH STREET		S	TH TREET	
Employee #	2947		HECTOR, MN 55342			ILIVIA, IN 56277	
Pay	07/04/2015- 07/17/2015 24.420 <u>Hours</u> 80.00		Pay Description NORMAL HOURS		Net Pay <u>Amount</u> 1,953.60	1,187.12	
				Total Gross	1,953.60	Year To-	
	Current	Year To-Date	Other Deductions		Current	<u>Date</u>	
Gross	1,953.60		SUN LIFE FINANCIAL		7.35 28.00	102.90 392.00	
Fica/Med	147.37	2,224.49	AFSCME HWY UNION		50.00	750.00	
Fed. W/H	253.48	3,845.14	VALIC DEF COMP		25.18	352.52	
State W/H	101.00		COLONIAL INS POST TAX		15.88	222.32	•
Pera	126.98		HEALTH PARTNERS HRA PRETX PREM UNION I	CE	11.24	157.36	
Tot W/H	628.83	9,510.41	Total	al Deductions	137.65	1,977.10	
			Benefits		Current	Year To- Date	
			ER PD LIFE 20,000		0.00	23.80	
			HRA ER EXP UNION EE'S		0.00	4,358.90	
				Total Benefits	0.00	4,382.70	
	Avoilable	Current Accrued	~ ·	urrent Taken	YTD Accrued	YTD Taken	Max Accum
Vacation	74.832			0.000	110.000	87.750	0.000
Sick	24.170			0.000	56.000	48.000	0.000
Comp Time	0.000			0.000	3.750	3.750	0.000
Personal	0.000			0.000	0.000	0.000	0.000
Wellness	0.000		•	0.000	0.000	0.000	0.000
Bereavement	0.000	0.000)	0.000	0.000	8.000	0.000
LWOP	0.000	0.000)	0.000	0.000	0.000	0.000
Catastrophic	0.000			0.000	0.000		0.000
				A AAA	ስ ስስስ		
Military Lea	0.000			0.000	0.000	0.000	(1.000
FMLA	0.000 0.000			0.000 0.000	0.000 0.000	0.000	0.000
•		0.000 <u>Bank</u>					0.000
FMLA Direct	0.000	0.000 Bank HOME TOWN BANK		0.000			0.000
FMLA Direct	0.000 Account	0.000 Bank HOME TOWN BANK SOUTHPOINT FEDERAL CREDIT UN		0.000 Amount			0.000
FMLA Direct	0.000 Account Checking	0.000 Bank HOME TOWN BANK SOUTHPOINT FEDERAL		0.000 <u>Amount</u> 987.12			0.000